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## Substitute for Form PTO-875

Application or Booklet Number

10-634.381

(Column 1)

(Column 2)

**SMALL ENTITY**

OR

OTHER THAN  
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a), (b), or (c))		
SEARCH FEE (37 CFR 1.16(k), (l), or (m))		
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))		
TOTAL CLAIMS (37 CFR 1.16(i))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.16(h))	minus 3 =	*
APPLICATION SIZE FEE (37 CFR 1.16(s))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s)	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))		

\* If the difference in column 1 is less than zero, enter "0" in column 2

RATE (\$)	FEE (\$)
X	
X	
TOTAL	

RATE (\$)	FEE (\$)
X =	
X =	
;	
TOTAL	

APPLICATION AS AMENDED - PART II

1.17.06

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(i))	*	10	Minus	** 20
Independent (37 CFR 1.16(i))	*	2	Minus	*** 3	= —
Application Size Fee (37 CFR 1.16(s))					
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS (37 CFR 1.16(i))					

SMALL ENTITY	
RATE (\$)	ADDITIONAL FEE (\$)
1. =	
2. =	
TOTAL	
ADDITIONAL FEE	

OTHER THAN SMALL ENTITY	
RATE (\$)	ADDI TIONAL FEE (\$)
OR ' =	
OR ' =	
OR	
OR TOTAL ADD FEE	

AMENDMENT 8		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT FEE
	Total (37 CFR 1.160)	*	Minus	**	:
	Independent (37 CFR 1.161)(i)	*	Minus	**	:
	Application Size Fee (37 CFR 1.16(s))				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS (37 CFR 1.161)(ii)				

DATE (S)	ADDI TIONAL FEE (S)

	RATE (\$)	ADDITIONAL FEE (\$)
OP		
OP		
OP		
OP		
OP		
OP	TOTAL ADDITIONAL FEE	

- If the entry in column 1 is less than the entry in column 2, write 0 in column 3.
- If the highest number 5 is in column 1, write 1 in column 3.

... If the Highest Number Previously Paid For IN THIS SEAGE is less than 20, enter

... If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 2, enter 2.  
The 'Highest Number Previously Paid For' IN THIS SPACE is less than 2, enter 2.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number paid in the appropriate bin on any collection of information is required by 35 C.F.R. 1.101(c)(2).

This collection of information is required by 37 CFR 1.16. The information is required if you claim a benefit by the prior art which was filed by the USPTO to process an application. Confidentiality is governed by 35 USC 42 and 37 CFR 1.14. This collection is exempted from automatic declassification, including gathering, preparing, and submitting the completed application to the USPTO. Please do not depend upon this form or make any comments on the amount of time you require to complete this form and/or suggestions regarding its format. Send it to the Patent Office, Room 111, Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. If you are unable to reach the Patent Office, please send it to the address below.

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if the nearest distance is  $\alpha$ , then  $\beta = \alpha + \frac{1}{2}(\alpha + \sqrt{\alpha^2 + 4})$ .